

04C0

5-23-01

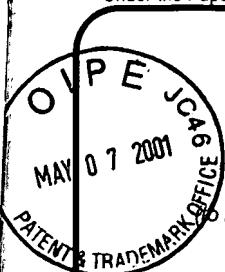
Please type a plus sign (+) inside this box →

PTO/SB/21 (08-00)

Approved for use through 10/31/2002, OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/821,935
		Filing Date	March 30, 2001
		First Named Inventor	Douglas E. Crafts
		Group Art Unit	Not yet assigned
		Examiner Name	Not yet assigned
Total Number of Pages in This Submission		Attorney Docket Number	42390P10315

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Formal Drawings; Figs. 1A-5; 5 pgs.	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input checked="" type="checkbox"/> Petition under 37 CFR 1.182	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Stamped, return postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
It is believed that this is the correct fee for this request, and no further fee is due, however, should any further fee be required for any reason relating to the enclosed materials, or any credit due, please deduct or credit said fees to Blakely Sokoloff Taylor & Zafman LLP Deposit Account 02-2666.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John Travis; Reg. No. 43,203
Signature	
Date	5-2-01

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: May 2, 2001

Typed or printed name	Reina Bernfeld
Signature	
Date	5-2-2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 130.00)

Complete if Known

Application Number	09/821,935
Filing Date	March 30, 2001
First Named Inventor	Douglas E. Crafts
Examiner Name	Not yet assigned
Group Art Unit	Not yet assigned
Attorney Docket No.	42390P10315

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-2666**

Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee	Fee	Fee	Fee Description	Fee Paid
105	130	205	65		Surcharge - late filing fee or oath	
127	50	227	25		Surcharge - late provisional filing fee or cover sheet	
139	130	139	130		Non-English specification	
147	2,520	147	2,520		For filing a request for ex parte reexamination	
112	920*	112	920*		Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*		Requesting publication of SIR after Examiner action	
115	110	215	55		Extension for reply within first month	
116	390	216	195		Extension for reply within second month	
117	890	217	445		Extension for reply within third month	
118	1,390	218	695		Extension for reply within fourth month	
128	1,890	228	945		Extension for reply within fifth month	
119	310	219	155		Notice of Appeal	
120	310	220	155		Filing a brief in support of an appeal	
121	270	221	135		Request for oral hearing	
138	1,510	138	1,510		Petition to institute a public use proceeding	
140	110	240	55		Petition to revive - unavoidable	
141	1,240	241	620		Petition to revive - unintentional	
142	1,240	242	620		Utility issue fee (or reissue)	
143	440	243	220		Design issue fee	
144	600	244	300		Plant issue fee	
122	130	122	130		Petitions to the Commissioner	130.00
123	50	123	50		Petitions related to provisional applications	
126	240	126	240		Submission of Information Disclosure Stmt	
581	40	581	40		Recording each patent assignment per property (times number of properties)	
146	710	246	355		Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355		For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355		Request for Continued Examination (RCE)	
169	900	169	900		Request for expedited examination of a design application	
Other fee (specify) _____						

SUBTOTAL (1) (\$ 0-)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent	-20** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>
Claims	- 3** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>
Multiple Dependent			= <input type="text"/>

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee	Fee Description
103	18	203	9 Claims in excess of 20
102	80	202	40 Independent claims in excess of 3
104	270	204	135 Multiple dependent claim, if not paid
109	80	209	40 ** Reissue independent claims over original patent
110	18	210	9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0-)

*or number previously paid, if greater; For Reissues, see above

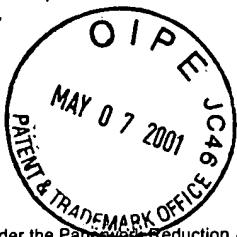
Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 130.00)

SUBMITTED BY

Name (Print/Type)	John Travis	Registration No. (Attorney/Agent)	43,203	Telephone	(512) 330-0844
Signature	<i>John Travis</i>			Date	5-2-01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



PTO/SB92 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U. S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

BOX PGPUB DRAWINGS

Commissioner for Patents
Washington, D.C. 20231

on May 2, 2001.
Date

Reina R. Bernfeld
Signature

Reina R. Bernfeld

Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Encl.: Transmittal Form
Fee Transmittal (+1)
Petition Under 37 CFR 1.182
Five sheets of formal drawings; Figures 1A-5